

UNDERSTANDING GENITAL HERPES

Genital herpes is a sexually transmitted infection (STI) that affects the genital areas of men and women. It is not a life-threatening disease. However, the virus never leaves your body, making it a lifelong condition that can reappear at various times, with or without symptoms.

FREQUENTLY ASKED QUESTIONS

Q *How common is genital herpes?*

A An estimated 1 in 5 North Americans has genital herpes and the number of new cases increases each year.^{1,2}

Q *How do you get genital herpes?*

A The virus passes from person to person through sexual contact (vaginal, oral and anal). Even if you have no symptoms, it is possible to transmit the virus to a partner.

Q *Are the symptoms obvious?*

A Not always. Because outbreaks are not always obvious, almost 75% of people who have genital herpes don't even know they are infected.³

REDUCING THE RISK OF TRANSMISSION

Once diagnosed with genital herpes, you should take precautions to reduce the risk of spreading it.

- Avoid sexual contact when symptoms are present (an "outbreak")
- Use lubricated latex condoms each time you engage in sexual intercourse, even when there are no signs of infection
- Avoid touching or breaking the blisters or sores and do not pick the scabs when they form
- Always wash your hands if you touch the blisters, sores or scabs
- If you or your partner has an active infection (or even the warning signs), avoid close contact with the blisters or sores
- When combined with safer sex practices, including condoms, suppressive therapy with *Valtrex*[®] once-daily, reduces the risk of transmitting genital herpes to a sexual partner

FREQUENTLY ASKED QUESTIONS

Q *If I take Valtrex[®], can I still spread genital herpes to my sexual partner?*

A When combined with safer sex practices, including condoms, suppressive therapy with *Valtrex*[®] once-daily, reduces the risk of transmitting genital herpes virus to your sexual partner. Talk to your doctor about what is best for you and your partner.

Q *Can women with genital herpes have healthy babies?*

A Yes, although genital herpes can be passed from mother to babies, women with genital herpes can and do have healthy babies.^{4,5} It's important to talk openly with your obstetrician or other healthcare provider if you have genital herpes. Care is needed at the time of birth if there is an active infection present. Your doctor will carefully monitor you and take any steps necessary to reduce your risk of passing the virus to your newborn. Discuss the options available with your doctor.

Q *What is the risk for passing the herpes virus to a newborn?*

A For women with known long-standing infections, the risk of passing the herpes virus to a newborn is low. The risk is much higher if the mother gets genital herpes for the first time during the third trimester of pregnancy or has an active outbreak at the time of labour.^{4,5}

Q *How will the baby be delivered?*

A Standard practice is to deliver the baby through a normal vaginal delivery unless there are signs or symptoms of an outbreak. In the case of an outbreak, a cesarean section may be recommended.⁵

TREATING YOUR GENITAL HERPES WITH VALTRESX (valacyclovir hydrochloride)

There are two different ways of treating genital herpes with *Valtrex*[®]:

Recurrent or intermittent therapy is when you take *Valtrex*[®] at the *first sign* of an outbreak. The goals with recurrent therapy are to shorten the duration of pain and discomfort of an attack, speed the healing of blisters, and reduce the duration of viral shedding.

Suppressive therapy is when you take *Valtrex*[®] every day to help prevent outbreaks *before* they occur. The goals with suppressive therapy are to reduce the number of genital herpes outbreaks before they happen and to reduce the risk of transmitting genital herpes to your sexual partner.

The efficacy of *Valtrex*[®] for reducing transmission of genital herpes has not been established in individuals with multiple partners, non-heterosexual couples, and couples not counselled to use safer sex practices.

If you are pregnant, or likely to become pregnant soon, or if you are breastfeeding, please inform your doctor before taking *Valtrex*[®]. *Valtrex*[®] does not often have side effects. Some people may feel sick or have a mild headache.

FREQUENTLY ASKED QUESTIONS

Q *Are there other treatments?*

A Yes, along with medication, there are things some people with genital herpes say are helpful, including: getting adequate rest, regular exercise, good nutrition or stress management.

SEEKING SUPPORT AND INFORMATION

Dealing with genital herpes may not be easy. Reaching out to others for support and being informed about genital herpes may help you cope and put you back in control of your life.

In addition to talking to your healthcare provider and talking to others with genital herpes, you can find out more information by contacting national organizations, going on the Internet and reading books.

The following is a listing of helpful resources:

Herpes Health Hotline	1-866-252-4666
The <i>Valtrex</i> National Patient Support Network (NPSN)	1-888-426-9555
Planned Parenthood Federation of Canada	(613) 241-4474
Ontario AIDS & Sexual Health Hotline	1-800-668-2437
BC STD Helpline	1-800-661-4337 or (604) 872-6652

WEBSITES

www.herpeshealth.com
www.herpesalliance.org
www.stdresource.com

www.herpesdiagnosis.com
www.torontoherpes.com
www.medlineplus.gov

www.iwannaknow.org
www.ashastd.org

HEALTH CANADA

www.hc-sc.gc.ca


BOOKS

Managing Herpes, How to Live and Love with a Chronic STD. By Charles Ebel. American Social Health Association, 1998

The Truth About Herpes. By Stephen L. Sacks, MD. Gordon Soules Book Publishers Ltd., 1997

The information on this handout is provided as a supplement to the **Information for the Patient** leaflet provided to you with your *Valtrex*[®] caplets. It is very important that you read the **Information for the Patient** leaflet before you start to take your *Valtrex*[®] caplets.

REFERENCES: 1. Patrick DM, Dawar M, Cook DA, et al. Antenatal seroprevalence of Herpes Simplex Virus Type 2 (HSV-2) in Canadian Women. *Sex Transm Dis* 2001;28(7):424-428. 2. Fleming DT, McQuillan GM, Johnson RE, et al. Herpes Simplex Virus Type 2 in the United States, 1976 to 1994. *NEJM* October 1997; Vol 337(16):1105-1111. 3. Wald A, Koutsky L, Ashley R, Corey L. Genital herpes in a primary care clinic: demographic and sexual correlates of herpes simplex type 2 infections. *Sex Trans Dis* 1997;24:149-155. 4. Brown AZ, Benedetti J, Ashley R, et al. Neonatal herpes simplex virus infection in relation to asymptomatic maternal infection at the time of labour. *NEJM* May 1991; Vol 324:1247-1252. 5. Expert Working Group on Canadian Guidelines for Sexually Transmitted Disease. Canadian STD Guidelines, 1998 Ed. Available at <http://www.hc-sc.gc.ca/hpb/lcdc/bah>

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